Surveillance Issues Associated with Risk Management



Surveillance Issues Associated With Risk Management

- Examples of partnerships analyzing insurance carrier claim data
- Use of group medical claims data to enhance worker safety and health data for epidemiological analysis and intervention
- Web based access and analysis of large relational data bases
- Alternative metrics for driving safety and health performance
- Other issues

I. Public/Private Partnership — Liberty Northwest Insurance and the Oregon Health Division

- Liberty Northwest provided case information on dermatitis to loggers from poison oak and the use of latex gloves in the restaurant industry. The Health Department looked for clusters of injuries and illnesses by employer and by industry.
 - Liberty provided the data
 - Health Dept. analyzed the data and developed the intervention strategies
 - Liberty made the employer contacts and disseminated the information

Benefits for Each Partner

Health Department

- Access to information that identified problems in "real time"
- Able to analyze full text fields
- Quick turn around for abatement
- Employers saw Liberty as a safe source of information on safety

Liberty Northwest

- Able to leverage expertise of Health Department
- Could analyze data in particular industries for patterns and proactively disseminate abatement information

Academic/Private Partnership — Kentucky Employers Mutual and Kentucky Injury Research Prevention Center

- Claims data used to identify cases of interest, consent obtained from injured worker, claimant and employer then contacted for information on the case.
- Follow-back questions go to injured/ill employee while the case is "fresh"
- Abatement strategies are developed and broadly disseminated in "real time"

Benefits for Each Partner

- Kentucky Injury and Prevention Research Center
 - Timely case identification
 - Personal identifiers allow followup
 - Conduit for getting information out to employers
- Kentucky Employers Mutual Insurance
 - Additional analysis capability
 - Help in prevention strategy development

Common Attributes of Both Models

- Both models insurers provided the data; researchers analyzed the data and helped develop prevention strategies; insurers disseminated the information
- These kinds of analyses generally not done in the insurance industry -- these participants willing to accept the "risk".
- In neither case did they calculate the dollar benefits but in both cases they believed they improved the bottom line
- Use of text fields critical for analysis -- coded data severely limited.
- Timeliness dramatically improved
- Confidentiality was considered critical in both models

II. Approach for Integrating Occupational and Nonoccupational Injury and Illness Data Bases

- *Problem:* The data on occupational injuries and illnesses is under reported/incomplete.
- *Proposed solution* Integrate data from workers compensation with group health insurance data, employee profile data, and intervention and corrective action data to provide a robust set of data for analysis.
- *Goal* is to be able to assess real injury/illness experience by work area and task

Associated Discussion

- Some under reporting is intentional.
- But systemic problems can also cause under reporting of work related injuries and illnesses.
- Company leadership focused on workers compensation; not on total health and productivity.
- Challenge is to shift their focus to broader data set.

III. Web-Based System for Rapid Analysis of Complex Relational Data Bases

• Problems:

- Very difficult to analyze complex workers compensation data bases
- Lot of sensitive information in these data bases that may need to be protected

• Solution:

 Create a relational data "cube" that makes analysis far more rapid and much simpler.

Attributes/Benefits

- Helps solve the confidentiality problems because the data does not need to be transferred to the user.
- Allows people with no software knowledge to construct their own tables and do their own analyses. No software needed -- only web browser
- User can look at data for their own company; their industry; or the whole State

Attributes/Benefits, cont.

- Can identify trends in injury, disease, changes in provider practice, and cost
- Can look at whether care guidelines are being followed for particular types of cases
- This technique could be particularly helpful as a tool to merge data bases

Alternative Safety and Health Performance Metrics

- New approaches for measuring safety and health performance are being developed in industry to drive continuous improvement and help make the business case for worker safety and health
- Use of OSHA data is being replaced by a more balanced approach that incorporates leading, trailing, and financial measures

Insights Into ORC's Alternative Approach

- Measure S&H Consistent With Other Parts of the Business (e.g. quality)
- Use S&H metrics to:
 - Drive Continuous Improvement
 - Measure process variables and outcomes
 - Incentivise the right behavior
 - Measure Performance
 - Make the "Business Case"

Balanced FrameworkMetrics Simplified

- What did we do?
 - Selected leading indicators
- What were the impacts?
 - Injuries, illnesses, fatalities, workers' comp.
 - Productivity
 - Product quality
 - Marketability
 - Employee perceptions/morale
 - Cost benefit

What Is Different About ORC Effort

- Includes Performance "Drivers"
- Identifies Metrics/Linkages outside of S&H "Silo"
- Uses Financials and Other Means to Bridge Communication Gap
- Focuses on Positive Contributions S&H
 Can Make to the Business
- Hopefully Will Initiate Mass Change -- incorporates "truth and labeling" re. the OSHA data

Will Improving S&H Metrics Make A Difference?

- Drive S&H Excellence by Focusing on Things That Matter
- Reduce Effort Spent on the OSHA Numbers
- Link Safety and Health Performance
 Closer to the Overall Business Strategy
- Enhance Ability of S&H to Compete for Resources Internally
- Improve Usefulness of Benchmarking

Other Issues Discussed by the Group

- Use of employee perception surveys for surveillance
- NIOSH funded Centers of Excellence to provide guidance on best practices on surveillance an intervention
- Surveillance research should involve teams that include researchers and insurance carriers